



***The 13th Annual***  
**TAKE OUR DAUGHTERS AND SONS TO WORK DAY**



**THURSDAY, APRIL 27, 2006**  
**8:15 A.M. -- Vola Lawson Lobby, at City Hall**

**MENTOR APPLICATION**  
**Due Friday, April 7**

Thank you for your interest. Mail to: Alexandria Office on Women, TODSTW, 421 King Street, Suite 400, Alexandria VA 22314 or Fax to 703.838.4976 or Email it to [jennifer.harris@alexandriava.gov](mailto:jennifer.harris@alexandriava.gov).

Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Work Address: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Fax number: \_\_\_\_\_

E-mail address: \_\_\_\_\_

IN CASE OF EMERGENCY ON DAY OF EVENT, PLEASE PROVIDE YOUR CELL PHONE NUMBER AND ALTERNATE CONTACT AT YOUR PLACE OF WORK: \_\_\_\_\_

Please check one:

\_\_\_\_\_ Pair me with a student for the day:

I would prefer to be paired with (circle one): “daughter”, “son” or either.

Number of students you or your office would like to mentor: \_\_\_\_\_

\_\_\_\_\_ I will be bringing a child to work. Name of child: \_\_\_\_\_ (City of Alexandria employees only)

Special notes/requirements for student (i.e. age requirement, needs to have photo ID, must wear comfortable shoes): \_\_\_\_\_

You are invited to attend the opening reception at 8:15am at Alexandria City Hall, 301 King Street, in the Vola Lawson Lobby. You will be paired with your “daughter” or “son” during the ceremony.

We will confirm your student’s name(s) on or prior to April 21 and provide a suggested schedule for the day. Your participation will be based upon the availability of students and their career interests. On occasion, students are absent on the day of the event; however, we will not know prior to the reception.

**As a mentor, your responsibilities will include providing lunch for your student and returning them to school in the afternoon.** Parents will have completed a permission form indicating their consent for you to transport their child. Check with your student about his/her bus schedule. Students must be returned no later than 3:45pm to take an activity bus home.

**Thank you for your participation in this important program.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

For more information, call Jennifer Harris at 703.838.5030, or email her at [jennifer.harris@alexandriava.gov](mailto:jennifer.harris@alexandriava.gov).